



COUNTY OF LOS ANGELES

Public Health

CYNTHIA A. HARDING, M.P.H.
Interim Director

JEFFREY D. GUNZENHAUSER, M.D., M.P.H.
Interim Health Officer

313 North Figueroa Street, Room 708
Los Angeles, California 90012
TEL (213) 240-8156 • FAX (213) 481-2739

www.publichealth.lacounty.gov



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September 18, 2014

TO: Each Supervisor

FROM: Cynthia A. Harding, M.P.H.
Interim Director

SUBJECT: **UPDATE ON MULTI-DEPARTMENTAL MEDI-CAL OUTREACH AND ENROLLMENT GRANT (ITEM 13, BOARD AGENDA OF JUNE 10, 2014)**

This report is in response to Supervisor Ridley-Thomas' motion of June 10, 2014 requesting the Directors of Public Health (DPH), Mental Health (DMH), Health Services (DHS), Public Social Services (DPSS), and the Sheriff (LASD) provide updates on the implementation of the Multi-Departmental Medi-Cal Outreach and Enrollment Grant. This is the first report to your Board on the Departments' efforts and enrollment progress.

Background

On June 10, 2014, your Board approved authorization to accept a \$7 million grant award from the State Department of Health Care Services (DHCS) effective July 1, 2014 through December 31, 2016. The purpose of the grant is to conduct outreach and enroll residents newly eligible for accessing services through provisions under the Affordable Care Act. This Medi-Cal Outreach and Enrollment Assistance project aims to reach and assist particularly hard-to-reach uninsured target populations including: persons with mental health disorder needs, persons with substance use disorder needs, the homeless, young men of color, incarcerated persons, families of mixed immigration status, and persons with limited English proficiency.

Implementation

This report provides an update on the first 60 days of the project: July 1, 2014 through August 31, 2014. The DPH Maternal, Child and Adolescent Health (MCAH) Program, as the lead Division for this project, has taken steps to successfully implement the new grant in partnership with DPH Substance Abuse Prevention and Control (SAPC), DMH, DPSS, DHS, and Sheriff's Department (LASD).

Since the inception of the project, DPH/MCAH hired a Project Manager to coordinate the overall initiative and ensure that grant objectives are met. DPH also finalized the contract agreement with DHCS ("State Allocation Plan"), and submitted a detailed and revised project work plan and budget along with an initial project report.

Interdepartmental coordination has included finalizing the Memorandum of Understanding (MOU) to formalize the working agreement between the County departments. DPH/MCAH also developed interdepartmental reporting and invoicing templates and trained DPH staff on reporting and invoice processing.

Data Collection

DPH/MCAH made enhancements to its existing outreach and enrollment case management system, the Children's Health Outreach Initiatives (CHOI) data system. Enhancements included allowing for additional system users by adding data fields to capture all data specifically required for this project.

DPH staff arranged for three all-day trainings of outreach and enrollment staff from each department and their subcontracting agencies. Training modules included an overview of Medi-Cal enrollment procedures and processes and data system training for outreach and enrollment staff utilizing the CHOI data system. DPH staff continues to participate in technical assistance calls with DHCS, and began convening weekly workgroup calls with the participating departments to disseminate information.

For departments not using the CHOI data system or those using the system partially (DPSS, LASD, SAPC, and DMH), arrangements are in process to work with their individual data systems to track and extract deliverables for the grant objectives.

Enrollment Progress

Each participating department will be providing outreach and enrollment services using various strategies in order to reach their specific target population. Strategies and progress are briefly summarized below for each department. A detailed description of outreach strategies and each department's work plan is attached, and was previously provided to your Board. (See June 10, 2014 Board Agenda, Item 13, Attachment F).

DPH/MCAH

MCAH provides Medi-Cal outreach and enrollment services focused on children through an existing network of Children's Health Outreach, Enrollment, Utilization and Retention (CHOEUR) contractors. Through this grant, MCAH expanded their target population to the families (with children) of mixed-immigration status and limited English proficiency. MCAH renegotiated and augmented existing CHOEUR contracts with 17 community-based organizations, clinics, hospitals, LAUSD, and the cities of Long Beach and Pasadena. The additional targets and objectives were added to the contracts through a separate scope of work. Additional trainings were provided for any new staff hired by contracted agencies; all agencies will be utilizing the CHOI data system to track and report outreach and enrollment work. Services began on July 1, 2014 to reach families of mixed immigration status and persons with limited English proficiency. To date, July 1, 2014 through August 31, 2014, enrollment staff have reached out to 2,925 potential clients via 86 separate events and assisted with 413 Medi-Cal applications. In future reports, DPH will be able to provide detailed client demographics and Service Planning Area (SPA) information.

DPH/SAPC

SAPC is conducting outreach to persons with substance use disorder needs through its existing network of Community Assessment Service Centers (CASCs). SAPC renegotiated contract amendments and augmentations with contracted CASCs in each SPA to reach target persons with substance use disorders. DPH is currently conducting outreach training for CASC staff and

direct services to clients will begin soon. DPH/MCAH will be receiving outreach and enrollment data from SAPC by October 2014.

DHS

DHS completed a Request for Application process in mid-August to select community provider clinic contractors to target families of mixed immigration status, persons with limited English proficiency, young men of color, and the homeless individuals. Services with their subcontracting clinics were delayed until outreach and enrollment staff is fully trained. The contracted entities will begin providing services on September 1, 2014.

DMH

DMH contracted benefits establishment agencies have initiated the required outreach and enrollment services by targeting community-based organizations and Specialty Mental Services providers that serve uninsured individuals with mental health disorder needs. Through their collective efforts, the two contracted agencies' outreach and enrollment specialists had outreached to 486 potentially eligible individuals and submitted 18 Medi-Cal applications during the July 1, 2014 to August 31, 2014 period.

DPSS

DPSS will be reaching out to young men of color using the DPSS Health and Nutrition Mobile Office to attend community events and provide direct application assistance. DPH/MCAH is coordinating with DPSS to provide data training to the DPSS staff and obtain the outreach and enrollment information.

LASD

LASD has repositioned five full-time Custody Assistants to staff the activities under the grant as of July 1, 2014 and has begun in-reach within the Los Angeles County jail system as well as application assistance. From July 1, 2014 through August 31, 2014, LASD has provided in-reach activities to 1,721 inmates and assisted with 600 Medi-Cal applications. DPH is in the process of transitioning LASD to the CHOI data system, and in future reports, DPH will be able to provide detailed client demographics and SPA information for this target population.

The next comprehensive quarterly report covering the July 2014 - September 2014 reporting period will be submitted in December 2014. If you have any questions or would like additional information, please let me know.

CAH:sb

Attachment

c: Chief Executive Officer
Acting County Counsel
Executive Officer, Board of Supervisors
Department of Mental Health
Department of Health Services
Department of Public Social Services
Sheriff's Department

LOS ANGELES COUNTY MEDI-CAL OUTREACH & ENROLLMENT GRANT COLLABORATIVE PROJECT WORK PLAN	
GOAL 1. OUTREACH: Increase the number of Medi-Cal eligible clients in Los Angeles County who receive outreach, education and information regarding the Medi-Cal Program, particularly among the DHCS targeted populations (e.g. persons in jails, persons with mental health disorder needs, young men of color, persons with substance use disorder needs, Limited English Speaking, mixed-status families, homeless)	
Milestone	Description of Activity
Objective 1.1: Department of Public Health/Maternal, Child and Adolescent Health-Children's Health Outreach Initiatives (DPH/MCAH) contracted agencies will successfully engage a minimum of 30,000 individuals in the target population of limited English proficient and mixed status families in L.A. County who are eligible for Medi-Cal through an outreach or "in-reach" contact.	<ul style="list-style-type: none"> • Contracted agencies will hire additional staffing to fulfill DHCS grant personnel and conduct DHCS Grant Scope of Work activities • Schedule outreach events and maintain a list or calendar of sites, dates and times • Conduct outreach via telephone, walk-ins, events (presentations, fairs, etc.) and complete outreach summaries. Event summaries to include site, date, name of staff, flyers, number of individuals contacted, sign-in sheets and if appropriate, materials presented. • Enter documentation of outreach numbers into MCAH online database.
<p>Objective 1.2 DPH/Substance Abuse Prevention Control (SAPC) plans to conduct outreach to at least 8,400 current patients of contracted SUD treatment programs.</p> <p>Objective 1.3 DPH/SAPC plans to conduct Medi-Cal eligibility screening with an average of at least 2,940 current patients of contracted SUD programs and persons seeking admission to SUD treatment services.</p>	<ul style="list-style-type: none"> • Contracted agencies will hire additional staff to fulfill DHCS Grant Scope of Work activities, including: <ul style="list-style-type: none"> - Initiate outreach to patients of SUD treatment programs. - Initiate Medi-Cal eligibility screening with patients of SUD treatment programs. - Initiate application assistance activities with patients screened as likely Medi-Cal eligible. - Initiate Medi-Cal screening and application assistance activities for persons seeking admission to SUD services through CASC. - Enter documentation of outreach numbers into DPH approved database and forward to MCAH data system.
Objective 1.4 Department of Health Services (DHS) -contracted agencies will take a Medi-Cal application for a minimum of 12,000 individuals (75 per month in Year One and 50 per month in Year Two) through 8 contracted Community Partner (CP) and homeless Intensive Case Management Services (ICMS) providers over 24 months in the target populations of limited English proficient, mixed status families, young men of color, and/or homeless individuals in LAC who are eligible for Medi-Cal through an outreach contact.	<ul style="list-style-type: none"> • DHS to issue solicitation/proposals from existing community partner (CP) and homeless Intensive Case Management Services (ICMS) contractors for outreach, enrollment and redetermination strategies for the following four (4) DHS target groups: Limited English Proficient, Mixed Status Families, Young Men of Color, and/or Homeless individuals. Proposal from CP and ICMS contractors to DHS will be expected to outline a specific proposal for outreach including target areas for outreach and enrollment outside the clinic setting (gyms, trade colleges, homeless shelters, etc.). • Develop and provide to contracted entities Event, Outreach and Enrollment (EOE) Tracking system, ideally web-based and potentially the same case management and activities system currently used by DPH MCAH to record all relevant and reportable activities of the OE workers, including locations, sites, date, names of enrollment and outreach staff, number of individuals spoken to, number enrolled, sign-in sheets and if appropriate, materials presented. • DHS to select contractors based on the highest scoring proposal in each of the 8 Service Planning Areas (SPAs) • Identify organizations and entities to receive outreach grants, develop regular reporting and check-in procedures, develop payment methodologies for grantees, provide training for EOE Tracking system for OE workers. • Grantees will hire their FTE Outreach and Enrollment Worker. Grantees develop, complete and submit to DHS a twelve-month outreach and enrollment workplan for OE Worker

<p>Objective 1.5 Department of Mental Health (DMH) contracted partners will in-reach to a minimum of 9,520 potentially Medi-Cal eligible individuals <i>currently receiving services within the DMH network</i> due to mental health disorder needs, which will also overlap with persons who are homeless, young men of color, families of mixed immigration status and persons with limited English proficiency.</p> <p>Objective 1.6: DMH contracted partners will outreach to a minimum of 9,520 potentially eligible individuals, particularly those with mental health disorder needs in traditionally hard-to-reach subpopulations, including under-represented ethnic minorities, homeless persons, individuals with co-occurring mental health and substance use disorders, and transition-age youth over the 2-year grant period.</p>	<ul style="list-style-type: none"> • Identify organizations and entities to receive in-reach and outreach activities. • Schedule in-reach and outreach activities. • Perform in-reach and outreach activities.
<p>Objective 1.7: The Department of Public Social Services (DPSS) will participate in outreach events in venues attractive to young men of color to outreach to approximately 13,920.</p> <p>Objective 1.8: DPSS will partner with community-based organizations, non-profits and other county agencies to outreach to young men of color through print media and other marketing channels.</p> <p>Objective 1.9: DPSS will partner with county departments to provide on-site workshops specifically geared towards youth including health check-ups provided by county departments.</p>	<ul style="list-style-type: none"> • Provide specific activities that will be performed under each objective • Select and confirm access to first event site that will be of interest to the target population. • Develop calendar of upcoming events. • Calendar Mobile Unit to attend events.
<p>Objective 1.10: The Los Angeles County Sheriff's Department (LASD) will obtain materials from DPSS and other agencies to provide all inmates (approximately 20,000) with access to information within the County jail facilities.</p>	<ul style="list-style-type: none"> • Obtain educational materials and post within the intake center and inmate housing units.

GOAL 2. ENROLLMENT: Increase the number of Medi-Cal eligible clients in Los Angeles County who apply for and are enrolled in Medi-Cal, particularly in the DHCS targeted populations (e.g. persons in jails, persons with mental health disorder needs, young men of color, persons with substance use disorder needs, Limited English Speaking, mixed-status families, homeless)	
Milestone	Description of Activity
Objective 2.1: DPH/MCAH contracted agencies will complete Medi-Cal applications for a minimum of 8,000 uninsured but eligible clients.	<ul style="list-style-type: none"> • Conduct enrollment activities utilizing DPH/MCAH approved client intake form • Enter data from DPH forms into the MCAH database system
Objective 2.2: DPH/MCAH contracted agencies will also provide clients with referrals to other health and nutrition services as needed.	<ul style="list-style-type: none"> • Screen and refer clients for appropriate services. Document referral information on client intake/other DPH approved forms.
Objective 2.3: DPH/MCAH contracted agencies will confirm enrollment of 75% of Medi-Cal applications submitted or assisted by agency staff within 90 days.	<ul style="list-style-type: none"> • Conduct enrollment verification and troubleshooting using DPH approved enrollment verification and troubleshooting form • Enter data from DPH approved forms into MCAH database
Objective 2.4: DPH/SAPC will assist at least 2,940 individuals to successfully enroll in Medi-Cal with a special emphasis on persons with substance use disorder (SUD) service needs that are seeking SUD services through a SAPC-contracted CASC site or already admitted as a patient in a SAPC-contracted SUD treatment program.	<ul style="list-style-type: none"> • Conduct outreach activities to the target populations • Screen clients for eligibility requirements • Assist clients with and/or conduct enrollment activities, including verification • Refer clients to appropriate SUD and ancillary services, as needed
Objective 2.5 DHS's eight contracted outreach and enrollment workers will (combined) enroll into Medi-Cal approximately 9,000 individuals over a 24 month period (or 5,400 Medi-Cal enrollments in Year One and 3,600 in Year Two). <u>This calculation expects that 75% of the applications taken per month by each enroller will result in an approved application and enrolled Medi-Cal person.</u> Each CP or ICMS contracted outreach and enrollment worker will work to obtain an approved Medi-Cal application among DHS's target populations (young men of color, limited English proficient, mixed status household, homeless) outside of the traditional clinic setting.	<ul style="list-style-type: none"> • Grantee's OE Workers will take a minimum of 75 applications per month for 24 months, with a goal of 75% of these resulting in a Medi-Cal enrollment. • Grantees submit EOE Tracking Summary data to DPH Grant Administrator on a monthly basis. DPH Grant Administrator logs and monitors progress meeting grant goals, works with grantee and DHS to troubleshoot where outreach and enrollment goals are not being met. • DHS contracted OE Worker, DPH and DPSS will develop and implement a system for OE worker to monitor and track application disposition on behalf of Medi-Cal recipients enrolled by the OE worker and to work with DPH and DPSS to troubleshoot application issues, such as obtaining from the Medi-Cal enrollee any missing information needed by DPSS to disposition the application.

<p>Objective 2.6: DMH contracted partners will enroll at least 2,570 existing DMH clients (identified in <i>1.5</i>) into Medi-Cal over the 2-year grant period. DMH contracted partners will file reconsideration applications in the event of denial when applicable.</p>	<ul style="list-style-type: none"> • Conduct enrollment activities and file reconsideration applications when applicable.
<p>Objective 2.7: DMH contracted partners will enroll at least 2,570 individuals in the community (identified in <i>1.6</i>) into Medi-Cal over the 2-year grant period. DMH contracted partners will file reconsideration applications in the event of denial when applicable.</p>	<ul style="list-style-type: none"> • Conduct enrollment activities and file reconsideration applications when applicable.
<p>Objective 2.8: DMH contracted partners will complete the short client satisfaction survey for at least 90% of applications submitted.</p>	<ul style="list-style-type: none"> • Complete the survey
<p>Objective 2.9: DMH contracted partners will follow-up with the individual within 90 days post-application to verify enrollment.</p>	<ul style="list-style-type: none"> • Conduct enrollment verification and troubleshooting
<p>Objective 2.10: DPSS will enroll 2,030 young men of color over the 2 year grant period.</p>	<ul style="list-style-type: none"> • Conduct enrollment activities
<p>Objective 2.11: At intake into the jail, LASD will ask inmates if they have medical insurance and if they are interested in receiving more information.</p>	<ul style="list-style-type: none"> • Obtain printed educational materials and post within the intake center and inmate housing units.
<p>Objective 2.12: LASD will have assigned jail staff who will assist the potentially eligible Medi-Cal inmate with completion of an application. Conservatively, during the two year grant period, jail staff will assist 5,000 inmates with completion of a Medi-Cal application.</p>	<ul style="list-style-type: none"> • Develop questionnaire and tracking mechanism within the intake process.

GOAL 3. RETENTION: Increase the number of Medi-Cal enrollees who retain their Medi-Cal coverage for the course of 8-12 months or more, particularly in the DHCS target populations (e.g. persons in jails, persons with mental health disorder needs, young men of color, persons with substance use disorder needs, Limited English Speaking, mixed-status families, homeless)	
Milestone	Description of Activity
Objective 3.1: DPH/MCAH contracted agencies will provide ongoing assistance (e.g. troubleshooting and problem solving, to a minimum of 5,000 Medi-Cal clients needing assistance with enrollment, utilization of benefits, retention and re-determination of benefits.	<ul style="list-style-type: none"> • Conduct troubleshooting/problem solving for Medi-Cal clients. Document results on appropriate forms • Enter data from DPH approved forms into the MCAH database.
Objective 3.2: DPH/MCAH contracted agencies will successfully contact and offer renewal/re-determination assistance to 65% of Medi-Cal clients who they assisted in submitting/facilitating their Medi-Cal application.	<ul style="list-style-type: none"> • Conduct Medi-Cal renewal/re-determination assistance and document on DPH approved intake form. • Enter data from intake form into MCAH database.
Objective 3.3: DPH/MCAH contracted agencies will have a minimum of 65% retention rate at 14 months for a sample of Medi-Cal clients who submitted applications and were confirmed enrolled.	<ul style="list-style-type: none"> • Conduct retention activities and document results on retention verification documents • Submit data from retention verification documents to DPH
Objective 3.4: DPH/SAPC will complete processes for linking DPSS Medi-Cal application eligibility units with SAPC CASC agencies on regional basis by July 31, 2014.	<ul style="list-style-type: none"> • Conduct planning meetings with DPSS personnel to complete arrangements for regional linkages.
Objective 3.5: DPH/SAPC contracted agencies will work in coordination with the DPSS regional office liaisons to attempt to make contact with 65 percent of patients, who DPSS previously assisted with submitting/facilitating their Medi-Cal application, to offer renewal/re-determination assistance through periodic follow up contacts in-person, by telephone, email, or U.S. Postal Service at periodic intervals.	<ul style="list-style-type: none"> • Conduct retention activities and document results on retention verification documents. • Submit data from retention verification documents to DPH.

<p>Objective 3.6: DHS contractors will aim to retain in Medi-Cal, or re-enroll, in Year Two of the grant 4,050 individuals who were enrolled into Medi-Cal in Year One of the grant. (This would be 75% of the 5,400 individuals who were enrolled into Medi-Cal in Year One of the grant). DHS will ensure that beginning no later than June 2015 (or twelve months after the first Medi-Cal application is taken by the OE Worker), OE workers will be expected to combine their outreach and enrollment efforts with an aggressive retention, or redetermination, strategy. OE workers will be expected to personally contact the Medi-Cal recipients that they enrolled twelve months prior by phone, in person or through any other related in-person strategy, and obtain redetermination paperwork for at least 75% of the Medi-Cal clients who they originally assisted in submitting an approved Medi-Cal application the year prior.</p>	<ul style="list-style-type: none"> • Grantee will, in partnership with DPH MCAH, implement a redetermination tracking system to track which of their Medi-Cal patients are due to redetermine their coverage in Medi-Cal. • Grantee will implement Medi-Cal renewal/re-determination outreach activities such as by phone, text or in person to obtain submission of the necessary redetermination paperwork within the redetermination period. OE will assist Medi-Cal recipient with completion of redetermination paperwork where appropriate/needed. • DHS contractor will enter all relevant outreach activities and data into OE Tracking System.
<p>Objective 3.7: DMH directly-operated and contracted agencies will financially screen all clients receiving services at intake and on annual basis and refer Medi-Cal beneficiaries that are found to have lost their benefits back to DPSS to address whatever it was that caused their enrollment to lapse.</p> <p>Objective 3.8: DMH contracted partners will contact and offer renewal/re-determination assistance to Medi-Cal clients who they assisted with submitting/facilitating their Medi-Cal application.</p>	<ul style="list-style-type: none"> • Agency financial worker will meet with client at intake and annually, thereafter, to do an eligibility check for Medi-Cal benefits. • If there is an interruption in benefits, financial worker will work with client to help determine why client was dropped from Medi-Cal, (i.e., are they no longer eligible for Medi-Cal or did they fail to complete their redetermination package). • If client needs further assistance, they will be referred to a medical case worker to help facilitate linkage to DPSS. Medical case worker will help client contact their DPSS case worker to reinstate their Medi-Cal benefits and/or complete the redetermination package, if necessary • Conduct retention activities and documents results on retention verification documents.
<p>Objective 3.9: DPSS will ensure that 90% of their Medi-Cal enrollees through this grant are still enrolled 8 months later.</p> <p>Objective 3.10: DPSS will ensure that 90% of its Medi-Cal enrollees are still enrolled 12 months after initial enrollment.</p>	<ul style="list-style-type: none"> • Conduct re-determination activities • DPSS will make enhancements to its LEADER system to capture report data for this target group and alert workers prior to termination date. • DPSS Eligibility Workers will follow-up with enrollees to ensure pending termination is valid.

GOAL 4. TRAINING: Increase the capacity of County Grantee Departments and Contractors to do outreach/enrollment/retention work and performance tracking.	
Milestone	Description of Activity
Objective 4.1: The DPH/MCAH contracted training agency will provide a minimum 100 hours of Medi-Cal enrollment, troubleshooting and retention trainings over the grant period to the MCAH contracted agencies, other County Department staff and contractors to ensure all grantee staff are fully versed in the Medi-Cal Program and how to assist clients with enrollment, utilization and re-determination.	<ul style="list-style-type: none"> • Develop/ update training curricula, training modules, training manuals and pre-post-tests to reflect assisting clients with Medi-Cal enrollment, troubleshooting and retention. • Schedule trainings and maintain a calendar of training modules requested, sites, dates and times. • Conduct trainings and obtain sign-in sheets and post-tests (whenever applicable)
Objective 4.2: DPH/SAPC personnel and CASC contracted community outreach workers will complete training on project objectives and activities.	<ul style="list-style-type: none"> • Conduct training for CASC agencies.
Objective 4.3: DHS will ensure that in Year One (Phase I), all CP Clinic and ICMS OE workers will obtain all required DPH MCAH Medi-Cal enrollment, troubleshooting and retention trainings for Certified Application Assistants over the grant period. These are the same trainings required by DPH MCAH contracted workers to ensure staff are fully versed in the Medi-Cal Program and how to assist clients with enrollment, utilization and re-determination.	<ul style="list-style-type: none"> • 100% of grantee outreach and enrollment workers will attend one training including pre-post-tests to DHS contractors who will be assisting clients with Medi-Cal enrollment, troubleshooting and retention. • Schedule trainings and maintain a calendar of training modules requested, sites, dates and times. • Conduct trainings and obtain sign-in sheets and post-tests (whenever applicable) • Schedule and attend refresher course with focus on redetermination/renewal, with 100% of OE workers attending.

<p>Objective 4.4: DMH contracted partners will provide a minimum of 72 hours of Medi-Cal training to staff located at DMH directly-operated and contracted agencies, community-based agencies and organizations serving under-represented ethnic populations; faith-based organizations, such as, churches, temples and mosques; the National Alliance on Mental Illness (NAMI) chapters; transitional age youth (TAY) drop-in centers and emergency shelter programs; disabled student centers on community college campuses; and homeless shelters and encampments.</p>	<ul style="list-style-type: none"> • Schedule trainings • Conduct trainings
<p>Objective 4.5 DPSS will track and report on performance as it relates to enrollment and retention of its target population.</p>	
<p>Objective 4.6: LASD will obtain training for 5 Custody Assistants in the process to assist with the completion of a Medi-Cal application within the first six months of the grant.</p>	<ul style="list-style-type: none"> • LASD will partner with DPSS to obtain training on the DPSS computer system, which gathers data for benefits including Medi-Cal applications. This system will be utilized to report the agreed upon performance measures.

SUMMARY OF DEPARTMENTAL PROJECT ACTIVITIES

DEPARTMENT OF PUBLIC HEALTH – MATERNAL, CHILD AND ADOLESCENT HEALTH - CHILDREN'S HEALTH OUTREACH INITIATIVES (MCAH)

MCAH manages contracted community-based agencies (CBOs) to conduct outreach in the community and provide comprehensive health coverage enrollment, utilization and retention services. Contracted agency staff not only assist clients with applications for programs including Medi-Cal, the Medi-Cal Targeted Low-Income Program (formerly Healthy Families), Healthy Kids, Kaiser Permanente Child Health Plan and other low and no-cost health coverage programs, but the fully-trained staff also troubleshoot application, utilization and redetermination problems to ensure clients maintain their coverage.

MCAH will enlist current contracted agencies (which include multi-cultural and multi-lingual CBO's and clinics across L.A. County, the cities of Long Beach and Pasadena and the Los Angeles Unified School District) and expand their respective scopes of work to conduct further outreach activities at locations including parenting classes, WIC offices, child care centers, community resource/cultural centers, schools, clinics, faith-based organizations and through partnering with other assistance programs that serve families and individuals in need (e.g. Employment Development Department, Consulate offices and housing assistance programs). These outreach activities will be in the form of presentations, community health/enrollment fairs and one-on-one contacts. In addition, agencies will set up appointments either in-person or over the phone to complete the Medi-Cal application process step-by-step with each client. Staff at contracting agencies will be Certified Application Assistants (CAAs) and/or Certified Enrollment Counselors (CECs) and will be responsible for inputting data into MCAH's existing online database system which will trigger the system to provide "prompts" to contact clients and provide them with follow-up services, including a 30 to 90 day post-application follow-up to verify enrollment. The online database system also provides prompts at four to six month post-enrollment follow-up to offer assistance with utilizing benefits, and a prompt at 11 months post-enrollment follow-up to offer assistance with coverage renewal/re-determination at the one-year mark. Follow-up activities are conducted over the phone or in-person, depending on the needs of the client.

Quarterly objectives/benchmarks will be established, and the MCAH database will generate monthly and quarterly reports to track performance and progress toward objectives, both for the overall MCAH program portion, and also for each MCAH contracted agency. A Quality Improvement Plan (QIP) has been established with each agency under its current contract and will be updated per the grant. If objectives are not initially reached, a review of the QIP along with a Plan of Corrective Action with clear steps on how the agency will work to achieve the objectives will be instituted.

A MCAH-contracted training agency will provide additional training for the agencies as needed, as well as for County staff and contracted agencies of the other County Departments participating in this grant. The training will include hands-on modules for Medi-Cal enrollment, troubleshooting and retention strategies to ensure contracted agencies and County staff is fully versed in the Medi-Cal Program and how to assist clients with enrollment, utilization and re-determination.

DEPARTMENT OF PUBLIC HEALTH – SUBSTANCE ABUSE PREVENTION AND CONTROL (SAPC)

SAPC proposes to conduct outreach and enrollment assistance activities with patients enrolled in its substance use disorder (SUD) treatment programs through its eight lead contracted agencies operating Community Assessment Service Centers (CASC) and its 18 network sites located throughout the County with multiple sites in each of the Service Planning Areas (SPA) and Supervisorial Districts (SD). Through the CASC network, SAPC proposes to: 1) conduct outreach activities with patients currently enrolled and/or those individuals seeking admissions to SAPC SUD treatment services; 2) screen patients for Medi-Cal eligibility; and 3) assist potential Medi-Cal eligible individuals through guidance and a warm hand off to the Department of Public Social Services to complete the application process. In addition, the CASC network will work in coordination with the designated DPSS regional office liaisons to help patients retain Medi-Cal eligibility over time through periodic follow up contacts in-person, by telephone, email, or U.S. mail beginning at month 6 of the project and at quarterly intervals thereafter.

SAPC has an established secure web-based information system in which its contracted providers, including the CASC agencies, submit billings, patient demographics, service encounter data, and other contractually required documents and reports. SAPC will use its existing system for the CASC network to submit data needed for monitoring, evaluating, and reporting project performance.

SAPC will conduct an on-going process evaluation of the project and use findings to ensure quality improvement through the project period. This will involve continuous monitoring performance of each CASC agency to identify emerging implementation challenges and to make adjustments or corrections as early as possible to resolve procedural or design flaws.

DEPARTMENT OF HEALTH SERVICES (DHS)

DHS intends to issue a Request for Applications (RFA) to Community Partner (CP) contractors and Intensive Case Management Services (ICMS) providers for the homeless who are currently contracted with DHS. Applicants selected from this RFA process will enter into an agreement to enroll as many individuals as possible into the Medi-Cal program who are currently eligible but not enrolled.

Selected applicants, or grantees, will reach the target populations in community-based settings, that is, enrollment outside of and beyond-the-traditional-clinic-walls. This includes, but is not limited to, Medi-Cal outreach and enrollment in gyms, community or trade colleges, local community establishments, community gathering events, homeless shelters and/or other areas of high concentration of homeless (i.e., Skid Row), and in people's homes, i.e. through the use of the *Promotora* model.

DHS intends to fund a maximum of 8 selected Applicants with this funding (one in each SPA). The Department aims to have at least one grant-funded Medi-Cal enroller in each SPA, if possible. The highest scoring application in each SPA will be funded.

Funds for selected CPs and/or ICMS contractors will be provided in three ways:

1. **Funds to hire 1 Full Time Employee (FTE) CAA or CEC for Medi-Cal Outreach and Enrollment.** Selected grantee will receive \$38,000 per year for both years of the grant (or \$76,000 over two years). If the grantee intends to offer a benefit package to the

employee grant funding may be used to cover those benefits up to 25% of the salary (or \$9,500 per year, in addition to the \$38,000 per year base salary).

2. **Reimbursement for each Medi-Cal application submitted.** The grantee will receive a flat-fee payment of \$15 for each Medi-Cal application that is submitted (not approved), with a goal of each CAA/CEC FTE submitting a minimum of 75 applications per month. In order for the grantee to receive the full \$15, 75% of the CAA's Medi-Cal applications must ultimately be approved by the Department of Public and Social Services (DPSS). So long as the grantee does not fall below the 75% approval rate, they will be paid \$15 for each application submitted to DPSS. If the grantee falls below the 75% approval rate threshold, the \$15 payment rate will be reduced at a prorated amount to be determined by the Department.
3. **Redeterminations/Renewals.** Beginning in the second year of the program, the Medi-Cal outreach and enrollment workers will focus on a combination of new Medi-Cal enrollment and Medi-Cal retention activities to ensure that Medi-Cal recipients renew their coverage at their 12 month redetermination date. Grantees will receive \$10 for each Medi-Cal redetermination processed on behalf of those patients who enrolled through this grant-funded program approximately 12 months prior.

All grant-funded Medi-Cal Outreach and Enrollment workers will receive the necessary training prior to project implementation which will include, but is not limited to, grant-specific trainings and trainings on the MCAH on-line data tracking system. In Year Two, grant-funded Medi-Cal Outreach and Enrollment Workers will obtain a refresher training that includes strategies on successful renewal and/or redetermination efforts.

Data will be collected and reported in MCAH's online database.

DEPARTMENT OF MENTAL HEALTH (DMH)

DMH proposes to utilize two qualified Medi-Cal Outreach and Benefits Establishment contractors for this program. Contractors will in-reach to existing clients and outreach to eligible potential clients.

Contractors will assist individuals with benefits establishment applications, as well as any subsequent appeals and reconsideration processes. Additionally, contractors will screen individuals for Medi-Cal eligibility and keep them engaged in the application process to reduce "no shows" for required appointments; complete and file Medi-Cal applications and other applications for services the client may be eligible for; request applicants to complete a short client satisfaction survey; follow up with individuals ninety (90) days after the submission of the initial Medi-Cal application to confirm and verify enrollment; and contact and offer renewal/re-determination assistance to individuals who they assisted with submitting and facilitating their Medi-Cal application.

Contractors will target all eight SPAs at various locations, such as:

- DMH directly-operated and contracted programs;
- community-based agencies and organizations serving under-represented ethnic populations;
- faith-based organizations, such as, churches, temples and mosques;
- National Alliance on Mental Illness (NAMI) chapters;
- transition-age youth (TAY) drop-in centers;
- emergency shelter programs;
- disabled student centers on community college campuses; and

- homeless shelters and encampments.
- Contractors will be required to provide 72 hours of Medi-Cal eligibility and benefits enrollment training to providers within the DMH network, community-based agencies and organizations such as those listed above.

DMH will work with the agencies to determine the system they will use to track and transmit data.

DEPARTMENT OF PUBLIC SOCIAL SERVICES (DPSS)

DPSS will participate in outreach events at venues attractive to the target population using the existing DPSS Health & Nutrition Mobile Office and the online enrollment system, "Your Benefits Now (YBN)". Grant funds will be used for outreach activities that are not allowable under the Department's existing funding structure. Specifically, DPSS may coordinate with procurement vendors to supply marketing materials, consultation services, and media and marketing support for outreach events, such as:

- A. Partner with CBOs, profit and non-profit entities to coordinate outreach efforts at existing campaigns including, but not limited to, the following events:
 - a. Fiestas Patrias
 - b. Taste of Soul
 - c. Care Harbor
 - d. Fiesta Broadway
 - e. X Games
 - f. Grand Prix Long Beach
 - g. Antelope Valley Fair
 - h. 626 Night Market
 - i. LA Greek Festival
 - j. Walnut Park Summer
 - k. Community Events
 - l. Watts Summer Fest
 - m. Wilmington Health Festival
 - n. Community College Events
 - B. Utilize radio stations, Public Service Announcements, community print media that attract the target population.
 - C. Secure celebrities, professional sports figures, etc. to serve as spokespersons for Public Service Announcements.
 - D. Event costs such as registration/matriculation; equipment & recreational supplies; event giveaways & samples; general materials & supplies.
- At minimum, participation of outreach events will be held once at each of the LA County Supervisorial Districts.

DPSS will track Medi-Cal outreach, enrollment and retention from the initial application date over the course of the grant period with the goal of retaining 90% of the Medi-Cal enrollees to ensure the continuation of coverage 12 months after initial enrollment.

SHERIFF DEPARTMENT (LASD)

The goal of LASD is to provide application assistance to interested, Medi-Cal eligible offenders prior to their release. Educational posters and materials will be distributed throughout the jail.

During the process in the Inmate Reception Center, uninsured inmates will be identified. A list will be promulgated daily and provided to the Community Transition Unit staff. The Community Transition Unit (CTU) Custody Assistants (CA) will interview the uninsured inmates in the housing areas to expedite the application process for submission to DPSS to determine Medi-Cal eligibility. On-site DPSS personnel will be co-located with CTU personnel to ensure efficiency.

LASD proposes the use of CTU CAs within the jails to assist individuals with Medi-Cal application assistance. The jail setting requires special staffing considerations due to safety and security of the inmates and staff. The benefit of using CA items, as opposed to DPSS or CBO staff, are:

1. Access the inmate's housing area to conduct the interview without requiring additional security; and
2. Access to booking information which will decrease the application time.